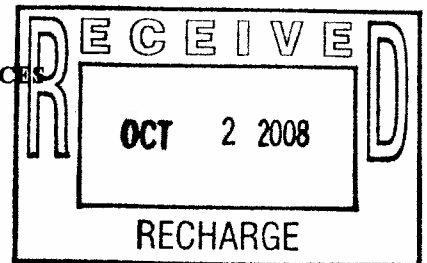


ARIZONA DEPARTMENT OF WATER RESOURCES

Water Management Division
3550 North Central Ave, 2nd Floor
Phoenix, Arizona 85012-2105
Phone (602) 771-8585 Fax (602) 771-8689



**APPLICATION FOR GROUNDWATER
SAVINGS FACILITY PERMIT (§ 45-812.01)**

APPLICATION FEE IS \$ 500.00 DUE UPON FILING.

PERMIT FEE OF \$ 350.00, PLUS NOTICE AND
PUBLICATION FEES TO BE DETERMINED,
ARE ALSO DUE PRIOR TO ISSUANCE OF PERMIT.

PLEASE SUBMIT ONE ORIGINAL AND ONE COPY OF THE
COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS.

FOR OFFICE USE ONLY

Application No.: 72-572386.0002

Date Received: 10-2-08

1. Name of Applicant: Roosevelt Irrigation District

103 W. Baseline Road	Buckeye	AZ	85326
Mailing Address	City	State	Zip

Facility Contact Person Stan Ashby Telephone (623) 386-2046 Fax (623) 386-4360
2. Name of Active Management Area or Irrigation Non-Expansion Area if applicable, and name of groundwater basin and subbasin where the facility will be located Phoenix AMA; West Salt River Valley Sub-basin
3. Name of the owner(s) of the land where the facility will be operated Various rightholders/landowners within the
Roosevelt Irrigation District (57-002517) boundaries
Mailing Address _____
(If more than one owner, attach a list showing corresponding land owner and well registration number(s)).
4. Legal description of the location of the facility Portions of Townships 1 & 2 North and 1 South, Ranges 1,2,3,4, and 5 West
between the Agua Fria and Hassayampa Rivers (quarter/quarter/quarter/section, township and range)
5. Name of recipient(s) of in lieu water. Attach list if necessary. Roosevelt Irrigation District rightholders set forth in
Appendix "B" to Plan of Operation
6. The maximum annual amount of water that may be stored at the facility 60,000 acre-feet per annum
7. Proposed duration of permit Ten years

Revised 3/23/2006

8. Registration number(s) and location of well(s) from which groundwater withdrawals will be curtailed.
(if more than two wells, attach an additional page) See Appendix "D" to Plan of Operation

55- _____ Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____ 1/4 _____
55- _____ Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____ 1/4 _____

9. Please attach the following:

- A. A detailed plan for proving the amount of annual groundwater savings.
- B. Plan of operation for the facility that: (1) Describes the facility in detail; (2) Demonstrates direct reduction or elimination of groundwater withdrawals resulting from the receipt of in lieu water; (3) Demonstrates that the substitute or in lieu water would not have been a reasonable alternative to the recipient without the project; (4) Demonstrates that the substitute or in lieu water was not delivered before 9/1/90; (5) Demonstrates that the substitute or in lieu water is the only reasonably available substitute for groundwater; (6) Describes the area of impact of the water storage.

I (We), Roosevelt Irrigation District, the applicant(s) named in this application, do hereby certify under the penalty of perjury, that the information contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.

(623) 386-2046

Telephone

Stanley H. Ashby
Signature of owner or authorized agent

Superintendent

Title

103 W. Baseline Road

Mailing Address

Buckeye

City

AZ

State

85326

Zip

STATE OF ARIZONA

County of Maricopa

)

) ss.

Subscribed and sworn to before me this 29 day of September, 20 08.

Notary Public



KIM MOORE

Notary Public, State of Arizona

Maricopa County

My Commission Expires

January 10, 2009

My commission expires.

Revised 3/23/2006